

**STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY**

PROGRESS SHEET

☒ SURFACE WATER

☐ GROUND WATER

NAME William A. Spencer				TELEPHONE NO. (509) 722-4792	
ADDRESS 4521 C Hwy 25		CITY Hunters		STATE WA	ZIP CODE 99137
ASSIGNED TO		TELEPHONE NO.		DATE ASSIGNED	
ADDRESS		CITY		STATE	ZIP CODE
APPLICATION NO. S3-30298		PERMIT NO.		CERTIFICATE NO.	
DATE AMENDED		DATE CANCELLED		W.R.I.A. 58	
APPLICATION					
DATE APPLICATION RECEIVED June 12, 2000		INITIAL \$10.00 FEE RECEIVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		DATE FEE RECEIVED June 13, 2000	
STATEMENT OF ADDITIONAL EXAMINATION FEE \$		DATE SENT		DATE RECEIVED	
DATE RETURNED FOR COMPLETION OR CORRECTION				DATE RECEIVED	
TEMPORARY PERMIT					
APPROVED BY				DATE ISSUED	
Statesman-Examiner PUBLICATION					
APPROVED BY		DATE APPROVED		DATE NOTICE SENT	
PROTESTED BY & DATE					
DATE AFFIDAVIT RECEIVED		CHECKED BY	TIME EXPIRED	DATE	TIME EXPIRED
APPROVED		DEPARTMENT OF PROVISIO			
EXAMINATION					
DATE EXAMINATION MADE		MADE BY	DATE REPORT OF EX		
DATE PERMIT FEE REQUESTED		AMOUNT DUE			
PERMIT					
PERMIT APPROVED BY		DATE APPROVED			
BEGINNING OF CONSTRUCTION					
DATE NOTICE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO			EXTENDED TO		
WELL DRILLER'S AND/OR CONSTRUCTION REPORT					
DATE SENT			DATE FILED		
COMPLETION OF CONSTRUCTION					
DATE NOTICE SENT		DATE FILED		EXTENSION FEE	
EXTENDED TO			EXTENDED TO		
PROOF OF APPROPRIATION					
DATE SENT		DATE FILED		EXTENSION FEE	EXTENDED TO
DATE CERT. FEE REQUESTED		AMOUNT DUE	DATE RECEIVED	DATE APPROVED FOR CERTIFICATE	APPROVED BY
CERTIFICATION					
PROOF EXAM REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		CERTIFICATE NUMBER		DATE ISSUED	

Copy of Mr. Spencer's enforcement file is in S3-30296

**CC: Fish and Wildlife/Beecher
Colville Tribe/Passmore
State Health Dept.
Stevens County Health**